

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) **DENISE D. GRANT**

Name

(2) **7221 SIENNA RIDGE LANE**

Address (number and street)

LAUDERHILL, FL 33319

City, State, Zip Code

☐ Check here if address has changed

(3) ID Number: _____

OFFICE USE ONLY

RECEIVED

NOV 26 2018

CITY CLERK'S OFFICE

(4) Check appropriate box(es):

☒ Candidate Office Sought: **LAUDERHILL CITY COMMISSION, SEAT #4**

☐ Political Committee (PC)

☐ Electioneering Communications Org. (ECO)

☐ Party Executive Committee (PTY)

☐ Independent Expenditure (IE) (also covers an individual making electioneering communications)

☐ Check here if PC or ECO has disbanded

☐ Check here if PTY has disbanded

☐ Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From **12 / 01 / 17** To **12 / 31 / 17** Report Type: **2017-M12**

☐ Original

☒ Amendment

☐ Special Election Report

(6) Contributions This Report

Cash & Checks \$ _____ , _____ , _____ . _____

Loans \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

In-Kind \$ _____ , _____ , _____ . _____

(7) Expenditures This Report

Monetary Expenditures \$ _____ , _____ , **965** . **60**

Transfers to Office Account \$ _____ , _____ , _____ . _____

Total Monetary \$ _____ , _____ , _____ . _____

(8) Other Distributions

\$ _____ , _____ , _____ . _____

(9) TOTAL Monetary Contributions To Date

\$ _____ , **9** , **452** . **00**

(10) TOTAL Monetary Expenditures To Date

\$ _____ , **4** , **443** . **88**

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) **MELANIE CLARKE**

☐ Individual (only for IE or electioneering comm.) ☒ Treasurer ☐ Deputy Treasurer

X *Melanie Clarke*

Signature

(Type name) **DENISE D. GRANT**

☒ Candidate ☐ Chairperson (only for PC and PTY)

X *Denise Grant*

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name DENISE D. GRANT

(2) I.D. Number _____

(3) Cover Period 12 / 01 / 17 through 12 / 31 / 17

(4) Page 1 of 2

(5) Date	(7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code	(8) Purpose (add office sought if contribution to a candidate)	(9) Expenditure Type	(10) Amendment	(11) Amount
12 / 01 / 17	TD BANK 7345 W. OAKLAND PARK BLVD. LAUDERHILL, FL 33319	BANK CHARGES			
01			CAN		1.00
12 / 07 / 17	BOSTON MARKET 5815 N. UNIVERSITY DRIVE TAMARAC, FL 33321	CAMPAIGN MEETING			
02			CAN	ADD	18.95
12 / 08 / 17	ROYAL PIG PUB 350 E. LAS OLAS BLVD. FT. LAUDERDALE, FL 33301	CAMPAIGN MEETING			
03			CAN	ADD	47.44
12 / 11 / 17	ROSS STORES 5755 N. UNIVERSITY DRIVE. TAMARAC, FL 33321	CAMPAIGN SUPPLIES			
04			CAN	ADD	206.42
12 / 14 / 17	PUBLIX 5855 W. OAKLAND PARK BLVD. #203 LAUDERHILL, FL 33313	CAMPAIGN FOOD			
05			CAN	ADD	224.21
12 / 20 / 17	DOLLAR TREE 332 SOUTH STATE ROAD 7 MARGATE, FL 33068	CAMPAIGN SUPPLIES			
06			CAN	ADD	114.04
12 / 21 / 17	OLIVE GARDEN 1555 N. UNIVERSITY DRIVE CORAL SPRINGS, FL 33071	CAMPAIGN MEETING			
07			CAN	ADD	52.64
12 / 21 / 17	SHELL OIL 7000 N UNIVERSITY DRIVE TAMARAC, FL 33321	CAMPAIGN GAS			
08			CAN	ADD	41.90

(1) Name DENISE D. GRANT (2) I.D. Number _____

(3) Cover Period 12 / 01 / 17 through 12 / 31 / 17 (4) Page ² of ²

DS-DE 14 (Rev. 11/13)

SEE REVERSE FOR INSTRUCTIONS AND CODE VALUES